

**MEGAVOLTAGE RADIATION THERAPY
STANDARD ADVISORY COMMITTEE (MRTSAC) MEETING**

Wednesday, April 13, 2005

Michigan Library & Historical Center
702 West Kalamazoo Street
Lake Ontario Room
Lansing, MI 48915

APPROVED MINUTES

I. Call to Order.

Chairperson Palmer called the meeting to order at 10:07 a.m.

a. Members Present and Organizations Represented:

Roland Palmer, Grand Valley Health Plan (Chairperson)
A. Soliman Behairy, MD, West Michigan Regional Cancer and Blood Center
Tewfik Bichay, PhD, Saint Mary's Health Care
Bridget R. Brambs, Detroit Medical Center
Paul Chuba, MD, PhD, St. John Hospital and Medical Center (Alternate)
Keith Crowell, Oaklawn Hospital (arrived at 10:13 a.m.)
Praveen Dalmia, Mount Clemens General Hospital (Alternate) (arrived at 10:13 a.m.)
Harry Dalsey, J.D., M.P.H., Weyco, Inc.
Sal Jafar, MD, Saint Joseph Mercy Health System – Ann Arbor
Bradley Gornick, AIA, ALA, Alliance for Health
Peter Lai, MD, Lakeland Regional Health System
Robert C. Marquardt, Memorial Medical Center of West Michigan
Walter M. Sahjidak, MD, Michigan Society of Therapeutic Radiologist and Oncologists
Joseph M. Spallina, FAAMA, FACHE, Arvina Group, LLC
Dawn Madison Williams, DaimlerChrysler Corporation

b. Members Absent and Organizations Represented:

Amr Aref, MD, St. John Hospital and Medical Center
Arthur J. Frazier, MD, Mount Clemens General Hospital

c. Staff Present:

Lakshmi Amarnath
John Hubinger
Andrea Moore
Stan Nash
Brenda Rogers
Matt Weaver

d. General Public in Attendance:

There were approximately 28 people in attendance.

II. Declarations of Conflicts of Interest.

No new conflicts were noted.

III. Review of Agenda.

Motion by Mr. Dalsey, seconded by Mr. Spallina, to accept the agenda as presented. Motion Carried.

IV. Review of Draft Minutes of March 16, 2005.

Motion by Dr. Sahjidak, seconded by Dr. Bichay, to accept the minutes as presented. Motion Carried.

V. Workgroup Meetings.

Chairperson Palmer reviewed the rules of the workgroups; including the issue of public participation (may participate if requested by workgroup chairperson) and alternates serving as a chairperson. The matter of possible conflicts of interest of members participating in the workgroups was discussed.

Motion by Mr. Dalsey, seconded by Mr. Crowell, to break into the workgroups for two (2) 1-hour sessions to complete their recommendations. Motion Carried.

The Committee divided into the Technical Workgroup and the Access Workgroup, as noted below, to work on the issues identified from 10:30 a.m. – 11:45 a.m. The workgroups recessed from 11:45 a.m. – 12:00 noon. The workgroups worked from 12:00 noon – 1:00 p.m. The workgroups recessed from 1:00 p.m. – 1:12p.m.

Technical Workgroup

Dr. Sahjidak (Chairperson)
Dr. Lai
Dr. Bichay
Mr. Spallina
Mr. Dalmia
Ms. Brambs
Dr. Chuba
Ms. Williams
Dr. Jafar

Access Workgroup

Dr. Theodore Batzer (Alternate)(Chairperson)
Mr. Crowell
Mr. Dalsey
Mr. Marquardt
Dr. Behairy
Mr. Gornick
Mr. Joe Meadows (Alternate)

The Committee reconvened at 1:12 p.m.

VI. Technical Workgroup Report.

Consensus Issues

- A. Brachytherapy will not have a role in determining machine usage.
- B. IMRT will have be a separate treatment visit category with a weight of 2.5. Defined as MLC based with automatic computer controlled delivery, as compliant with CMS coding.
- C. The treatment visit categories of simple, intermediate, and complex will stay the same.
- D. Three-dimensional conformal therapy would be under the complex treatment visit category and an additional category would not be created.
- E. In the very complex category:
 - a. Total body and hemi body would not change.
 - b. Patient under the age of 5 would be in a separate section, to be treated as an additive.

- F. Stereotactic radio-surgery would have an expanded definition to include both intracranial and extracranial treatments, include single and fractionated course of therapy. Weight for the single fraction would be changed from 12 to 8 and fractionated would be 2.5.
- G. Image Guided Radio-therapy would be not be given a separate weight. The data will be collected for use in the review of the standards in three years. Defined by CMS coding.
- H. Research units would be all or none. There will not be any partial research units.
- I. Tomotherapy units would be a non-special MRT unit.

Non-Consensus Issues

- A. CyberKnife definition, including special or non-special unit.
- B. ETV's for replacement of a unit and for addition of a machine.

VII. Access Workgroup Report.

Consensus Issues

- A. The hospital size and bed requirement be removed from the rural requirements for an MRT unit.
- B. ETV's for rural requirements would remain the same at 5,500, unless there is a change in the basic overall calculations.
- C. There must be a mentoring relationship with an established service, when establishing a new service.
- D. Quality standards would be same for rural settings.
- E. Relocation:
 - a. An existing or approved MRT may be relocated if meeting volume requirements.
 - b. Relocated MRT service or unit(s) must remain within the planning area.

Non-Consensus Issues

- A. 60-Mile Distance Requirement.
- B. Projected Volume Requirement for Relocated Unit.
- C. Ownership of Relocated Unit.
- D. Relocated site and original site must continue an association for a minimum of three years or until the relocated site is meeting volume requirements.

VIII. Discussion of Draft Language Presented at March 16, 2005 Meeting.

Tabled until the next meeting.

IX. Future Meeting Dates.

Tuesday, May 17, 2005
 Wednesday, June 15, 2005
 Wednesday, July 6, 2005

Motion by Mr. Spallina, seconded by Mr. Dalmia to have the Technical Workgroup meet prior to the next meeting of the Committee to resolve the remaining two non-consensus issues. Motion Carried.

Barbara Jackson, Economic Alliance, addressed the Committee.

The date, time and location of the meeting of the Technical Workgroup will be posted on the website and public attendance is permitted.

X. Public Comment.

Dr. Farideh Bagne, MIRO Cancer Centers, addressed the Committee.

XI. Adjournment.

Motion by Dr. Behairy, seconded by Mr. Gornick, to adjourn the meeting at 2:07 p.m. Motion Carried.